

2019 Maine Integrated Youth Health Survey Fifth and Sixth Grade

Thank you for taking this survey. In order for it to be useful, it is important that you answer each question honestly. All of your answers will be kept secret. They will never be seen by anyone at your school. Your name will not be put with your answers. Again, thank you very much for being an important part of this project.

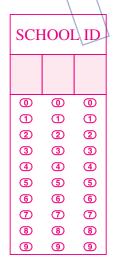
INSTRUCTIONS

- 1. This is not a test, so there are no right or wrong answers. We would like you to work quickly, so that you can finish.
- 2. All of the questions should be answered by marking one of the answer spaces. If you do not find an answer that fits best, use one that comes close. If you do not understand a question or cannot answer it, just leave it blank.
- 3. Your answers will be read by a computer. To help the computer read your answers, please do the following:
 - Use only a blue or black pen or pencil.
 - Carefully make heavy marks inside the ovals.
 - Completely erase any answer you wish to change.

MARKING INSTRUCTIONS			
CORRECT MARK	INCORRECT MARKS		
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- Make no other marks or comments on the answer pages. Any extra marks will cause the computer to make mistakes when it reads your survey.
- 4. Please mark only one answer, unless the directions tell you to mark more than one answer.

Survey Codes: The following numbers will be provided to you by the person giving this survey. Please write the numbers in the spaces below. Then fill in the ovals below that match those numbers.



CLASS ID			
0	0	0	
1	1	1	
2	2	2	
3	3	3	
4	4	4	
(5)	(5)	(5)	
6	6	6	
7	7	7	
8	8	8	
9	9	9	

This survey is about your health and things that affect it. It will tell us what you and other students do that may affect your health. About 95,000 students in Maine are being asked to take this survey. The answers you give will be used to create better health education and programs for young people like yourself.

DO NOT write your name on this survey. The answers you give will be kept secret. No one will know what you write. Answer the questions based on what you really do.

You may choose to take the survey or not take it. Your choice will not affect your grade in this class. You may not feel comfortable answering some questions. If you are not comfortable answering a question, just leave it blank. You can stop answering questions at any time you want.

You will not get in trouble for not completing the survey. It should not take you longer than this class period.

By taking this survey, your school and community may be better able to create programs that help you stay healthy.

Some questions ask about your background such as race and age. These will be used only to describe the types of students completing the survey. No answers will be used to find out your name. No names will ever be reported. The survey is research. This means that we will use everyone's answers to help us learn more about Maine students in general.

Be sure to read every question. Fill in the ovals completely. When you are finished, follow the instructions of your teacher.

THANK YOU very much for your help!

	PLEASE DO NOT WRITE IN THIS AREA
11.	Have you ever been bullied away from school property ? ○ Yes ○ No
10.	Have you ever been bullied on school property ? ○ Yes ○ No
rum	next 2 questions ask about bullying. Bullying is when 1 or more students tease, threaten, spread fors about, hit, shove, or hurt another student over and over again. It is not bullying when 2 students bout the same strength or power argue or fight or tease each other in a friendly way.
9.	When you ride a bicycle, how often do you wear a helmet? O I do not ride a bicycle O Rarely wear a helmet O Most of the time wear a helmet O Always wear a helmet
8.	How often do you sit in the back seat when you are riding in a car? Never
7.	How often do you wear a seat belt when riding in a car? Never Rarely Sometimes Most of the time Always
The	next 3 questions ask about safety.
6.	What language is spoken most often at home? (Select only one response.) Output Acholi Output English Output Khmer Output Spanish Output Some other language
5.	What is your race? (Select one or more responses.) O American Indian or Alaska Native O Asian O Black or African American O Native Hawaiian or Other Pacific Islander O White
4.	Are you Hispanic or Latino? Yes No
3.	In what grade are you? ○ 5th grade ○ 6th grade ○ Ungraded or other grade
2.	What is your sex? ○ Female ○ Male
1.	How old are you? 9 years old or younger 10 years old 12 years old 13 years old or older 12 years old

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The next question asks about feeling safe at school.

O Yes

 \bigcirc No

The	next 3 questions	ask about other	r drugs.			
23.	Have you ever so to get high?	Have you ever sniffed glue, breathed the contents of spray cans, or inhaled any paints or sprays to get high?				
	○ Yes	○ No				
24.	alcohol, or drug	use?		east one of your parents about the dangers of toba	cco,	
	○ Yes	○ No	○ Don't know			
25.	Do you agree or O Strongly agree	•	following statement O Disagree	? "My family has clear rules about alcohol and drug Strongly disagree	g use	
had		ou got up until y		recently. Think about all the meals and snacks a sure to include food you ate at home, at school		
26.	Yesterday, how i	nany times did yo	ou drink 100% frui	it juices such as orange juice, apple juice, or grape	e	
	○ 0 times, I did	-	ruit juice yesterday	or other fruit-flavored drinks.) 3 times		
	○ 1 time ○ 2 times			\$\\\Phi 4 or more times		
27.	•	nany times did yo not eat fruit yest	1 - 11 - 11	ot count fruit juice) 3 times		
	○ 1 time ○ 2 times			○ 4 or more times		
28.				such as carrots, green salad, corn, or green beans?		
	*	ench fries or othe not eat vegetable	er fried potatoes.)	○ 3 times		
	1 time 2 times	not cat vegetable	s yesterday	○ 4 or more times		
29.				tle, or glass of soda, sports drink, energy drink Red Bull, lemonade, sweetened tea or coffee drin		
				liet soda, other diet drinks, or 100% fruit juice.)	KS,	
	drinks, or oth		ports drinks, energy ed beverages yester	day		
	○ 1 time			○ 4 or more times		
30.	During the past 'parents/guardia		any days did you ea	at dinner at home with at least one of your		
	○ 0 days ○ 1 day	○ 2 days ○ 3 days	○ 4 days○ 5 days	○ 6 days ○ 7 days		

The next 3 questions ask about physical activity.

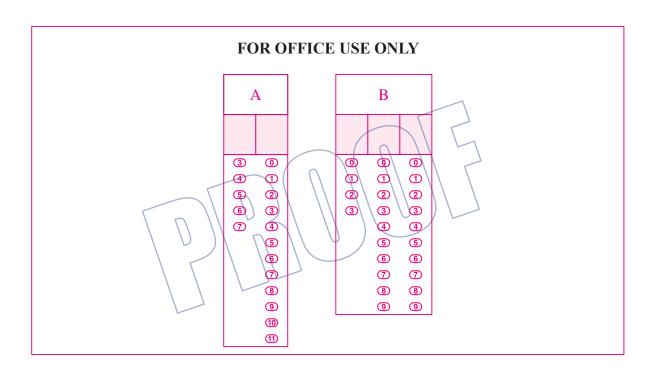
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41.	O I have never had	•		cult for you to stay Not sure	-	
42.	in your chest, or a	wheezing cough?				of breath, tightness
	O I have never had	d asthma \bigcirc Yes	s \bigcirc No	○ Not sure	2	
The	next question asks	s about diabetes.				
43.	Has a doctor or nur	•	that you have dia ○ Not sure	ibetes?		
The	next 2 questions a	sk about taking	care of your tee	th.		
44.	When was the last other dental work?		entist or dental h	ygienist for a chec	k-up, exam, te	eeth cleaning, or
	O During the past O Between 12 and	12 months (1 year		More than 24 mor (more than 2 years		○ Never ○ Not sure
45.		or your tooth hurt.		ng about missing s		nple, you needed to dentist for a regular
The	next 3 questions a	sk about protect	ing yourself fro	m the sun.		
46.	When you are outs SPF of 15 or highe		one hour on a su	inny day, how ofte	n do you wea	r sunscreen with an
	O Never	○ Rarely	○ Sometime	es	the time	○ Always
47.	When you are outs stay in the shade, von Never			our arms and legs	, or wear a hat	ne of the following: ? • Always
48.	During the past year		any sunburns? (A	sunburn is any re	ddening or bu	rn of the skin that
	lasts until the next Yes	day.) ○ No	○ Not sure			
The	next 2 questions a	sk about suppor	t you may have	at home or at sch	ool.	
49.	Do you agree or di Strongly agree	sagree that you ha	ave parents who ○ Not sure	try to help you suc Disagree	cceed? O Strongly	disagree
50.	Do you agree or di when you need it?	sagree that at leas	st one of your tea	chers really cares	and gives you	help and support
	○ Strongly agree	○ Agree	○ Not sure	○ Disagree	○ Strongly	disagree

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This is the end of the survey. Thank you very much for your help.



The Maine Integrated Youth Health Survey is a collaborative effort of the Maine Department of Education and the Maine Department of Health and Human Services, Maine Center for Disease Control and Prevention.

Maine Department of Health and Human Services



Maine Department of Education

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